	PTO/S	SB/05 (2/98
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	Approved for use through 09/30/2000. OMB 0651-0032
Patent and	Trademark Office: U.S. DEPARTMENT OF COMMERC

UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		PC9927C				
First Nan	ned Inventor or Applic	cation Identifier	Philip Albert Carpino			
Title	Treatment of Ins Secretagogues	sulin Resistance with Growth Hormone				
Express Mail Label No.		EV245637	EV245637226US			

(Only for new nonprovisional applications under 37C.F.R. §1.53(b))	Express Ma	ail Labe	l No.	EV245637226US				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application content	nts.		ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	PTO 98			
1. Fee Transmittal Form (e.g., PTO/SB/17)		6.	Microfiche	Computer Program (Appendix)	S			
2. Specification [Total Pages (preferred arrangement set forth below)	53		_	or Amino Acid Sequence Submission necessary)	910 U 10/62			
- Descriptive title of the Invention			a. Co	omputer Readable Copy	21			
- Cross References to Related Applications			b. Pa	per Copy (identical to computer copy)				
 Statement Regarding Fed sponsored R&D Reference in Microfiche Appendix 	1		=					
• • • • • • • • • • • • • • • • • • • •	1			atement verifying identity of above copies				
 Background of the Invention Brief Summary of the Invention 			ACCOMP	ANYING APPLICATION PARTS				
 Brief Description of the Drawings (if filed) 		8.	Assignme	nt Papers (cover sheet & document(s))				
Detailed DescriptionClaim(s)		9.		3.73(b) Statement Power of Attorning Power of Power of Attorning Power of Power	еу			
- Abstract of the Disclosure		10.		anslation Document (if applicable)				
3. Drawing(s) (35 U.S.C. 11.3)[Total sheets]	11.		n Disclosure Copies of IDS (IDS)/PTO-1449 Citations				
4. Oath or Declaration [Total pages 4		12.	Prelimina	y Amendment				
a. Newly executed (original or copy)		13.		ceipt Postcard (MPEP 503)				
b. Copy from a prior application (37 CFR	≀	Ì	(Should b	e specifically itemized)				
§1.63(d)) (for continuation/divisional with Box 17 com [Note Box 5 below]	npleted)	14.	Statement (PTO/SB/	(s) Status still proper and desired	tion,			
i. <u>DELETION OF INVENTOR</u> Signed statement attached deleting inventor(s) named in the prior applica see 37 C.F.R. §§1.63(d)(2) and 1.33(ition,	15.	Certified 0	copy of Priority Document(s) priority is claimed)				
5. Incorporation By Reference (useable if Box 4b in The entire disclosure of the prior application, from who copy of the oath or declaration is supplied under Box considered to be part of the disclosure of the accompaplication and is hereby incorporated by reference to	16.	Other:	Priority Claim This application is a divisional of U.S. Ser. 10/158,649 of 5/29/02, which is a divisional U.S. Ser. No. 09/380,186 of 8/26/99, now Patent No. 6,448, 263, whichis the Nationa Stage of Int'l Appln. No. PCT/IB98/00876 of 6/5/98, which was published on 12/30/98.	al of U.S. al				
*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).								
17. If a CONTINUING APPLICATION, check appropriate	box, and su	ipply the	requisite informatio	n below and in a preliminary amendment:				
Continuation Divisional Continuation-in-part (CIP) of prior application No: 10/ 158,649								
Prior application information: Examiner Group/Art Unit:								
18. CORRESPONDENCE ADDRESS								
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) 28523 Correspondence address below								
NAME (Print/type) John A. Wicthowski	/	Regist	ration No. (Attor	ney/Agent) 48,032]			

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								Complete if Known		
FEE TRANSMITTAL for FY 2003					Application Number				To Be Assigned	
					Filing Date				Herewith	
101112000					First Named Inventor				Philip Albert Carpino	
Effective 01/01/2003. Patent fees are subject to annual revision.					Examiner Name				To Be Assigned	
Applicant claims small status. See 37 CFR 1.27					Art Unit	t	,		To Be Assigned	
Total Amount of Payment (\$)918					Attorne	y Docke	t No.		PC9927C	
	METHOD	OF PAY		annly)	1			FFF C	ALCULATION (continued)	
METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Other None					3. ADDIT	IONAL F	EES	TEL O	LEGELATION (continued)	·
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Deposit					Fee	Fee	Fee	Fee		
Number	5-1445				Code	(\$)	Code	(\$)	Fee Description	Fee Pald
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Charge fee			_	ny overpayments	1053 1812	130 2,520	1053 1812	130	Non-English specification	
			during the pendency		1804	2,520 920*	1812	2,520 920*	For filing a request for reexaminating Requesting publication of SIR prior	الـــــا
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		FEE (CALCULATION		1251	110	2251	55	Extension for reply within first mon	ith
1. BASIC FILIN	IG FEE				1252	410	2252	205	Extension for reply within second i	month
Large Entity	Small	Entity			1253	930	2253	465	Extension for reply within third mo	nth
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Description	Fee Pald	1254	1,450	2254	725	Extension for reply within fourth m	onth
1001 750	2001	375	Utility filing fee	750	1255	1,970	2255	985	Extension for reply within fifth mon	ith
1002 330	2002	165	Design filing fee		1401	320	2401	160	Notice of Appeal	
1003 520	2003	260	Plant filing fee		1402	320	2402	160	Filing a brief in support of an appe	al
1004 750	2004	375	Reissue filing fee		1403	280	2403	140	Request for oral hearing	
1005 160	2005	80	Provisional filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
			SUBTOTAL (1)	\$)750	1452	110	2452	55	Petition to revive - unavoidable	
2. EXTRA CLA	IM FEES I	FOR UT	TILITY AND REISSUE		1453	1,300	2453	650	Petition to revive - unintentional	
			Extra Fee fro		1501	1,300	2501	650	Utility issue fee (or reissue)	
Total Claims	8 -	20**= [0 X 18	= 0	1502	470	2502	235	Design issue fee	
Independent Claims	5 -	3**= [2 X 84	= 168	1503	630	2503	315	Plant issue fee	
Multiple Depender	nt		280	= 0	1460	130	1460	130	Petitions to the Commissioner	
** or number pr	eviously p	aid, if g	reater; For Reissues, :	see below	1807	50	1807	50	Processing fee under 37 CFR 1.17	7 (q)
Large Entity	Small				1801	750	2801	375	Request for Continued Examination (,
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Description		1806	180	1806	180	Submission of Information Disclos Statement	ure
1202 18	2202	9	Claims in excess of	20	8021	40	8021	40	Recording each patent assignmen	
1201 84	2201	42	Independent claims	in excess of 3	1809	750	2809	375	property (times number of properti Filing a submission after final rejec (37 CFR 1.129(a))	
1203 280	2203	140	Multiple dependent	claim, if not paid	1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 **Reissue independent claims over original patent				Other Fe	e (specif	()				
1205 18	2205	9	**Reissue claims in over original pater							
	2	SUB	STOTAL (2) (\$)	168			-		SUBTOTAL (3) (\$)	0
SUBMITTED BY									Complete (if Applicable)	
Name (Printed/Type) John A. Wichtowski Signature				Deta	7	12- 1-		Reg. Number 48,032	45.0045	
Signature		4	La. Wick	orsan	Date	7/	22/1	2.3	Telephone (860) 7	15-6645

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